

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000006193

1. Entity Name

SDA FINANCE COMPANY

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90100 023 ***150.00

Principal Place of Business

777 SOUTH FLAGLER DRIVE
WEST TOWER SUITE 1400
WEST PALM BEACH FL 33401
US

Mailing Address

777 SOUTH FLAGLER DRIVE
WEST TOWER SUITE 1400
WEST PALM BEACH FL 33401
US

A0060070



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

777 S FLAGLER DRIVE

3. Mailing Address

777 S FLAGLER DRIVE

Suite, Apt. #, etc.

EAST TOWER, SUITE 1000

Suite, Apt. #, etc.

EAST TOWER, SUITE 1000

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

4. FEI Number

65-0535308

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PC ☐ Delete
NAME ABRAHAM, S. DANIEL
STREET ADDRESS 222 LAKEVIEW AVENUE
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE VSD ☐ Delete
NAME STEINBERG, EDWARD L DR.
STREET ADDRESS 222 LAKEVIEW AVENUE
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE T ☒ Delete
NAME TSANG, CARL
STREET ADDRESS 222 LAKEVIEW AVENUE
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☐ Delete
NAME FLEMING, PETER JR
STREET ADDRESS 101 PARK AVENUE, SUITE 3500
CITY-ST-ZIP NEW YORK NY 10178

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PC ☒ Change ☐ Addition
NAME ABRAHAM, S. DANIEL
STREET ADDRESS 777 S FLAGLER DR., EAST TOWER, SUITE 1000
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE VSD ☒ Change ☐ Addition
NAME STEINBERG, EDWARD L DR.
STREET ADDRESS 777 S FLAGLER DR., EAST TOWER, SUITE 1000
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE T ☐ Change ☒ Addition
NAME NOONAN, CHARLES
STREET ADDRESS 777 S FLAGLER DR., EAST TOWER, SUITE 1000
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CHARLES T. NOONAN 4/24/01 (361) 820-1320

CR2E034 (10/00)